## **Application Data Sheet**

## **Application Information** Application number:: Filing Date:: **Application Type:**: Regular Utility Subject Matter:: Suggested classification:: Suggested Group Art Unit:: CD-ROM or CD-R??:: Number of CD disks:: Number of copies of CDs:: Sequence Submission:: Computer Readable Form (CRF)?:: Number of copies of CRF:: PORTABLE ELECTRONIC DEVICE PHYSICAL Title:: SECURITY APPARATUS WITH ALARMED CABLE 14572P-060210US Attorney Docket Number:: Request for Early Publication:: No Request for Non-Publication:: No Suggested Drawing Figure:: **Total Drawing Sheets:** 12 No Small Entity?:: Latin name:: Variety denomination name:: Petition included?:: No Petition Type:: Licensed US Govt. Agency:: Contract or Grant Numbers One::

Secrecy Order in Parent Appl.:: No

**Applicant Information** 

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Germany

Status:: Full Capacity

Given Name:: Ralph

Middle Name::

Family Name:: Merrem

Name Suffix::

City of Residence:: San Francisco

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 601 Carolina Street

City of Mailing Address:: San Francisco

State or Province of mailing address:: CA

Country of mailing address::

Postal or Zip Code of mailing address:: 94107

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Canada

Status:: Full Capacity

Given Name:: John

Middle Name::

Family Name:: Cavacuiti

Name Suffix::

City of Residence:: North Vancouver

State or Province of Residence:: BC

Country of Residence:: Canada

Street of Mailing Address:: 4431 Cove Cliff Road

City of Mailing Address:: North Vancouver

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State or Province of mailing address:: BC

Country of mailing address:: Canada

Postal or Zip Code of mailing address:: V7G 1H7

## **Correspondence Information**

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

**Domestic Priority Information** 

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

This Application An Appn claiming 03/27/03

benefit under 35 USC

119(e) of

**Foreign Priority Information** 

Country:: Application number:: Filing Date::

## **Assignee Information**

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::